

CONFERENCE INFORMATION REPORT

CIVIL ACTION NO. _____

JURY TRIAL _____ **NON-JURY TRIAL** _____ **ARBITRATION** _____

SHORT CAPTION _____

TRIAL COUNSEL _____

REPRESENTING _____

LAW FIRM _____

ADDRESS _____

TELEPHONE & FAX _____

DATE FOR COMPLETION OF ALL DISCOVERY _____

PROTRACTED DISCOVERY REQUIRED? _____
Yes/No

IF YES, DESCRIBE PROPOSED DISCOVERY SEGMENTS BY SUBJECT MATTER OR PARTIES AND SUGGEST DATES FOR SEGMENTS:

SETTLEMENT CONFERENCE: WHEN REQUESTED? _____

MAGISTRATE JUDGE _____ **COURT MEDIATOR** _____ **PRIVATE MEDIATOR** _____
(LOCAL CIV. R. 53.3) (Name)

TRIAL TIME: TIME TO PRESENT YOUR CASE _____

TIME FOR ENTIRE TRIAL _____

OTHER COMMENTS:

DATE: _____

SIGNATURE OF COUNSEL

TYPE OR PRINT NAME

This form should be faxed to Chambers at 267.299.5078 or mailed or hand delivered to Chambers, Room 3810, U.S. Courthouse, 601 Market Street, Philadelphia, PA 19106-1741.

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